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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**Declaration
Submitted
With Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)Attorney Docket
Number

LSP-1017US

First Named Inventor

G. Nordin et al.

COMPLETE IF KNOWN

Application Number

Unknown

Filing Date

Concurrently Herewith

Art Unit

Unknown

Examiner Name

Unknown

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Clear Photopolymerizable Systems for the Preparation of High Thickness Coatings

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? | |
|--|----------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| | | | | YES | NO |
| PCT/EP2004/081699 VA2003A000028 | WO IT | 8/3/2004 8/7/2003 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance completing the form, call 1-800-PTO-8188 and select option 2.

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DECLARATION — Utility or Design Patent Application

| | | | | |
|---|--|---|-------------------------------|---|
| Direct all correspondence to: | <input checked="" type="checkbox"/> The address associated with Customer Number: | 24923 | OR | <input type="checkbox"/> Correspondence address below |
| Name | | | | |
| Address | | | | |
| City | | State | ZIP | |
| Country | Telephone | | Fax | |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | | |
| NAME OF SOLE OR FIRST INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | |
| Given Name (first and middle (if any)) | | Family Name or Surname | | |
| Gabriele | | NORCINI | | |
| Inventor's Signature | | | Date | |
| <i>Gabriele Norcini</i> | | | ✓ Jan 10, 2006 | |
| Residence: City | State | Country | Citizenship | |
| Comabbio | | Italy | Italy | |
| Mailing Address | | | | |
| Via Bruaisch, 923 | | | | |
| City | State | Zip | Country | |
| Comabbio | | I-21020 | Italy | |
| NAME OF SECOND INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | |
| Given Name (first and middle (if any)) | | Family Name or Surname | | |
| Stefano | | ROMAGNANO | | |
| Inventor's Signature | | | Date | |
| <i>Stefano Romagnano</i> | | | ✓ Jan 13 th , 2006 | |
| Residence: City | State | Country | Citizenship | |
| Gallarate | | Italy | Italy | |
| Mailing Address | | | | |
| Via Volta, 4 | | | | |
| City | State | Zip | Country | |
| Gallarate | | I-21013 | Italy | |
| <input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto. | | | | |

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| | |
|--------------------|---|
| DECLARATION | ADDITIONAL INVENTOR(S) Supplemental Sheet |
|--------------------|---|

Page 3 of 3

| | | | |
|--|-------|---|----------------------|
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) | | Family Name or Surname | |
| Marco | | VISCONTI | |
| Inventor's Signature | | Date Jan 9 th 2006 | |
| Varese Residence: City | State | Italy Country | Italy Citizenship |
| Via Bicocca, 62 | | | |
| Mailing Address | | | |
| Varese City | State | I-21100 Zip | Italy Country |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) | | Family Name or Surname | |
| Giuseppe | | LI BASSI | |
| Inventor's Signature | | Date Jan 9 th 2006 | |
| Gavirate Residence: City | State | Italy Country | Italy Citizenship |
| Via Stretti, 4 | | | |
| Mailing Address | | | |
| Gavirate City | State | I-21026 Zip | Italy Country |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) | | Family Name or Surname | |
| | | | |
| Inventor's Signature | | Date | |
| Residence: City | State | Country | Citizenship |
| Mailing Address | | | |
| City | State | Zip | Country |

This collection of information is required by 35 U.S.C. 118 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1480, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1480, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-8198 (1-800-786-8198) and select option 2.

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

| | |
|------------------------|-------------------------------|
| Application Number | New Filing |
| Filing Date | Concurrently Herewith |
| First Named Inventor | G. Narcini et al. |
| Title | Clear Photopolymerizable |
| Art Unit | Unknown |
| Examiner Name | Unknown |
| Attorney Docket Number | LSP-1017U8 |

I hereby appoint:

☒ Practitioners associated with the Customer Number:

24923

OR

☐ Practitioner(s) named below:

| Name | Registration Number |
|------|---------------------|
| | |
| | |
| | |
| | |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

24923

☐ Firm or Individual Name

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/08)

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-------------------|------------------------------------|-----------|-------------------|
| Signature | <i>G. Narcini</i> | Date | 13 / Jan. / 2006 |
| Name | Giuseppe LIBASSI | Telephone | 0039 0331 716 172 |
| Title and Company | Managing Director, LAMBERTI S.p.A. | | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 36 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9189 and select option 2.

SPECIAL POWER OF ATTORNEY

The undersigned, Dr. Carlo Lamberti, born in Milan on May 5, 1954, resident in Albizzate (Va), Via Piave No. 18, in his capacity as Managing Director of the company LAMBERTI S.P.A., with its registered office in Albizzate (Va), Via Piave No. 18 - Capital Stock L. 58, 957, 500,000, entered in the Business Register of Busto Arsizio (Va) under No. 16121 and the R.E.A. of Varese under No.182542, Tax Code 04453840151, having, in case of need, the necessary signing powers, conferred according to the minutes of the board on June 29, 1998,

appoints

as special proxy of the company:

Dr. Giuseppe Li Bassi, born in Varese on January 11, 1946, resident in Gavirate (Va), at Via Stretti No. 4 - C.F. LBS GPP 46A11 L682T, the Manager of Research and Development of the company, conferring upon him the power to:

- a. act as an independent agent to file in Italy with the Ministry of Industry, Commerce and Crafts (Italian Office of Patents and Trademarks), or with one of the Provincial Offices of Industry, Commerce and Crafts, applications for patents, useful models and brands, and do whatever else is necessary to have the application itself accepted, and for recognition of the rights derived from it vis-à-vis the Ministry of Industry, Commerce and Crafts;
- b. assign tasks to patent agents in order for them to act as agents of Lamberti S.p.A. in filing patent applications and whatever else is necessary to obtain the granting of them in Italy by the Italian Office of Patents and Trademarks, or in foreign countries by national or supranational bodies.

Confirmation and validity of the transaction conducted are promised.

Dr. Carlo Lamberti

/Signature/

No. 72049 on the list

AUTHENTICATION OF SIGNATURE

I, the undersigned, Dr. Vittorio Quagliata, notary in Sesto S. Giovanni, registered with the Notaries' Association of Milan, without witnesses present, since the party, with my consent, waived them, certify that the signature at the bottom of the preceding document was appended in my presence by Dr. CARLO LAMBERTI, born in Milan on May 5, 1954, his domicile being at the main office of the company. I, the notary, am certain of his personal identity and qualification, in his capacity as Managing Director of the company LAMBERTI S.P.A., with its office in Albizzate (Va), Via Piave No. 18 -, acting by virtue of the powers conferred upon him by the Board of Directors deliberating on June 29, 1998. Milano Foro Buonaparte, 12 June seventh, two thousand

BILL

| | |
|---------------------|--------|
| List | 500 |
| Stamps..... | 20,000 |
| Writing | 6,000 |
| Fee..... | 20,000 |
| Filing Charge | - |
| Register Copy | - |
| Registration | - |
| Tot. | 66,500 |

/Signature/

/Stamp:

QUAGLIATA VITTORIO FRANCESCO
NOTARY IN SESTO SAN GIOVANNI/